

ENTRY BLANK

PLEASE TYPE OR PRINT

Entered previous May Show

yes no

Ms.

Mr. Artist

FRED LEACH

(Last Name Last)

Permanent

Address

2964 CENTER RD ALON

Street

City

44011

Tel. 6216 934 5774

Zip

Area Code

Temporary or

Studio Address

SAME AS ABOVE

Street

City

Tel. ()

Zip

Area Code

If you do not presently live in one of the counties of the Western Reserve, which county were you born in? _____

Collaborator _____

(If Any)

If May Show entries are not accepted or not sold:

Artist will pick up at Museum.

Museum should dispose of.

Museum should ship to artist C.O.D. at this address:

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until May 18, 1980.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature

Fred Leach

ENTRY BLANKS

1

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Materials

WATERCOLOR

Title

BLUEFIELD W.V.

Price or NFS

\$500Insurance Value
if NFS Only

Size

30" X 40"

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
UnframedPrice of
FrameACCEPTED
X

DO NOT WRITE IN THIS SECTION

ACCEPTED
X

REJECTED

64 (1)

REJECTED

2

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Materials

Title

Price or NFS

Insurance Value
If NFS Only

Size

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
UnframedPrice of
Frame

ACCEPTED

DO NOT WRITE IN
THIS SECTION

ACCEPTED

RECEIVED

REJECTED

REJECTED

DATE

3/19 74